



STATE OF WASHINGTON  
**DEPARTMENT OF ECOLOGY**  
 This permit supersedes Ground Water Permit no. G3-27874 issued on August 31, 2004  
**SUPERSEDING PERMIT**  
 TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

<b>PRIORITY DATE</b> October 6, 1984	<b>PERMIT NUMBER</b> G3-27874
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<b>ADDRESS</b> Whitworth Water District No. 2 10828 Waikiki Road Spokane, WA 99218
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**Total Quantity Authorized for Withdrawal**

<b>WITHDRAWAL RATE</b> 5000	<b>UNITS</b> GPM	<b>ANNUAL QUANTITY (AF/YR)</b> 3700
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**Purpose**

PURPOSE	WITHDRAWAL RATE (GPM)	ANNUAL QUANTITY (AF/YR)	PERIOD OF USE
Municipal	5000	3700	01/01 - 12/31

**Source- Little Spokane River Water System**

SOURCE	COUNTY	WATERBODY	WATER RESOURCE INVENTORY AREA
Six (6) wells	SPOKANE	GROUNDWATER	55 - LITTLE SPOKANE

**Source Locations - Little Spokane River Water System**

Source Name	Parcel #	Well Tag	Twp	Rng	Sec	QQ	Latitude	Longitude
Well 8	37331.9182	AGC028	27 N	43 E	33	SW¼NE¼	47.79593°N	-117.377°W
Well 8A1	37324.1801	AHC773	27 N	43 E	32	NE¼SE¼	47.79452°N	-117.393°W
Well 8A2	37324.1801	BCE957	27 N	43 E	32	NE¼SE¼	47.7944°N	-117.394°W
Well 8B	37333.9135	ABR181	27 N	43 E	33	NW¼SW¼	47.79438°N	-117.387°W
Well 8C	37325.9078	AGC073	27 N	43E	32	SE¼NE¼	47.7946°N	-117.392°W
Well 9	37341.0173	AHC777	27 N	43 E	34	SE¼NE¼	47.79705°N	-117.351°W

Datum: WGS84

SUPERSEDING PERMIT

**Place of Use**

The place of use (POU) of this water right is the service area described in the most recent Water System Plan/Small Water System Management Program approved by the Washington State Department of Health.

**Proposed Works**

Six (6) wells, pumps, reservoirs, distribution system

**Development Schedule**

BEGIN PROJECT	COMPLETE PROJECT	PUT WATER TO FULL USE
Started	Complete	April 1, 2025

**Measurement of Water Use**

How often must water use be measured?	Weekly
How often must data be reported to Ecology?	Upon Request by Ecology
What volume should be reported?	Total Annual Volume
What rate should be reported?	Annual Peak Rate of Withdrawal (gpm)

**Provisions**

This authorization to make use of public waters of the State is subject to existing rights, including any existing rights held by the United States for the benefit of Indians under treaty or otherwise.

Nothing in this authorization shall be construed as satisfying other applicable federal, state, or local statutes, ordinances, or regulations.

**Wells, Well Logs and Well Construction Standards**

All wells constructed in the state must meet the construction requirements of WAC 173-160 titled "Minimum Standards for the Construction and Maintenance of Wells" and RCW 18.104 titled "Water Well Construction". Any well which is unusable, abandoned, or whose use has been permanently discontinued, or which is in such disrepair that its continued use is impractical or is an environmental, safety or public health hazard must be decommissioned.

All wells must be tagged with a Department of Ecology unique well identification number. If you have an existing well and it does not have a tag, please contact the well-drilling coordinator at the regional Department of Ecology office issuing this decision. This tag must remain attached to the well. If you are required to submit water measuring reports, reference this tag number.

Installation and maintenance of an access port as described in WAC 173-160- 291(3) is required.

**Measurements, Monitoring, Metering and Reporting**

An approved measuring device must be installed and maintained for each of the sources identified by this water right in accordance with the rule "Requirements for Measuring and Reporting Water Use", WAC 173-173, which describes the requirements for data accuracy, device installation and operation, and information reporting. It also allows a water user to petition the Department of Ecology for modifications to some of the requirements.

**Water Use Efficiency**

The water right holder is required to maintain efficient water delivery systems and use of up-to-date water conservation practices consistent with RCW 90.03.005.

**Proof of Appropriation**

The water right holder must file the notice of Proof of Appropriation of water (under which the certificate of water right is issued) when the permanent distribution system has been constructed and the quantity of water required by the project has been put to full beneficial use. The certificate will reflect the extent of the project perfected within the limitations of the water right. Elements of a proof inspection may include, as appropriate, the source(s), system instantaneous capacity, beneficial use(s), annual quantity, place of use, and satisfaction of provisions.

**Schedule and Inspections**

Department of Ecology personnel, upon presentation of proper credentials, will have access at reasonable times, to the project location, and to inspect at reasonable times, records of water use, wells, diversions, measuring devices and associated distribution systems for compliance with water law.

This permit shall be subject to cancellation should the permittee fail to comply with the above development schedule and/or to give notice to the Department of Ecology on forms provided by that Department documenting such compliance.

Dated this 25<sup>th</sup> day of September, 2014, at Spokane, Washington,

Department of Ecology

by   
Keith L. Stoffel, Section Manager

DATA REVIEW

OK 

KLS/KT:md

W: Super Permits/Tusa/2014/Whitworth Water Dist No. 2 G3-27874 permit 9-25-2014.doc

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Total Postage & Fees	\$

9/11/14  
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Sent To  
 Street, Apt. No.  
 or PO Box No  
 City, State, Zi  
**WHITWORTH WATER DISTRICT NO. 2**  
**10828 WAIKIKI ROAD**  
**SPOKANE, WA 99218**

PS Form 3800, August 2006 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
  
**WHITWORTH WATER DISTRICT NO. 2**  
**10828 WAIKIKI ROAD**  
**SPOKANE, WA 99218**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Teresa Gilbert*  
 B. Received by (Printed Name) *Teresa Gilbert* C. Date of Delivery *9/12/14*  
 D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type  
 Certified Mail®  Priority Mail Express™  
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 Insured Mail  Collect on Delivery  
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2. Article Number  
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